

Completion Report
Local Government Projects
Kentucky Community Development Office
Governor's Office for Local Development

PROJECT ID # _____

HB # _____

Type of Award

Please check one of the following (double-click on box to check):

☐ Local Government Economic Development Fund
 (LGEDF) "**Coal Severance**" Line-item

☐ Local Government Economic Development Fund
 (LGEDF) "**Coal Severance**" Grant

☐ **Community Economic Growth Grant (CEGG)**
☐ **Other Line-item projects**

Project

Project Title: _____ Contract # _____

Type of Project (construction, revitalization, purchase of land/equipment, etc.): _____

Project Allocation: \$ _____

Total Actual Funds Received: \$ _____ Total Actual Funds Expended: \$ _____

Has final draw been made? Yes _____ No _____

Recipient/Grantee

Legal Recipient/Grantee: _____

Street Address: _____

City, State, Zip Code: _____ Office Phone: _____

Official's Name: _____ County/City/Other: _____

Close-Out Narrative

Provide a narrative of how the project was completed (REQUIRED):

[illegible]

☐ Other financial reports, invoices and relevant documentation

Financial Summary

Note: All attached forms are final *pending* completion and receipt of this financial report.

Purpose (equipment, supplies, etc.)

Signature

☐ All copies of final close out documents are attached.

Signed _____ Date _____

Signatures

It is hereby certified that all activities undertaken by the recipient with funds provided under the *Memorandum of Agreement (MOA)* have to the best of my knowledge been carried out in accordance with the *MOA* and *Project Scope of Work*, that all funds have been expended or returned to the Commonwealth of Kentucky and that every statement and amount set forth in this instrument is true and correct as of this date.

Name and Title of Chief Executive Officer: _____

Signed _____ Date _____

Name and Title of Third Party Recipient: _____

Signed _____ Date _____

For GOLD use only

FOR GOLD USE ONLY: This completion report is hereby approved. The *MOA* and all supporting documents required are received.

KCDO Staff Reviewer: _____ Date _____

KCDO Authorized Approval: _____ Date _____

All records for this project are required to be maintained for three (3) years from the date of completion.

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Attachment B: Real Property Acquisition
Local Government Projects Completion Report
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Property Acquisition

Did this project involve the acquisition of real property? (check one) ☐ yes ☐ no

If yes, a copy of the deed transferring title must be attached to the back of this form if not already on file at the KCDO.

Please check to certify that a copy of the deed transferring title of any real property acquisition is attached:

☐ Copy of deed is attached. ☐ Copy of property survey, meets and bounds, etc. is attached.

Signature

Check below and sign to certify the attachment of all real property acquisition documents.

☐ All copies of real property acquisition documents are attached.

Signed _____ Date _____